

**SECRET**

Approved For Release 2006/11/13 : CIA-RDP75-00399R000100110111-2

<b>REPORTS INVENTORY</b>						CONTROL NO. DDS/OF-176							
PREPARE IN DUPLICATE													
1. TITLE OF REPORT (if a fill-in report include Form No.) Account No. 1469, Advances to Non-Government Facilities for Comp. and other						2. TYPE OF REPORT <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 20px; text-align: center;"><input checked="" type="checkbox"/></td> <td>STATISTICAL</td> </tr> <tr> <td style="text-align: center;"><input type="checkbox"/></td> <td>NARRATIVE</td> </tr> <tr> <td style="text-align: center;"><input type="checkbox"/></td> <td>MACHINE-NAME LISTING</td> </tr> </table>		<input checked="" type="checkbox"/>	STATISTICAL	<input type="checkbox"/>	NARRATIVE	<input type="checkbox"/>	MACHINE-NAME LISTING
<input checked="" type="checkbox"/>	STATISTICAL												
<input type="checkbox"/>	NARRATIVE												
<input type="checkbox"/>	MACHINE-NAME LISTING												
3. FUNCTIONAL AREA		PERSONNEL		TRAINING		ADMIN. GENERAL OTHER (specify)							
		LOGISTICS		SECURITY									
		MEDICAL		<input checked="" type="checkbox"/> FINANCE									
4. NO. OF COPIES PREPARED		5. FREQUENCY (weekly, monthly, quarterly, etc.) Monthly				6. DISTRIBUTION (No. of components not number of copies) 14							
7. FORMAT (memorandum, form computer print-out, etc) Machine Listing		8. ADP PROCESSING <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 20px; text-align: center;"><input checked="" type="checkbox"/></td> <td>YES</td> <td>IF YES GIVE ADP PROCESSING NO.</td> </tr> <tr> <td style="text-align: center;"><input type="checkbox"/></td> <td>NO</td> <td>Job: 212, Prog: A-5-N</td> </tr> </table>				<input checked="" type="checkbox"/>	YES	IF YES GIVE ADP PROCESSING NO.	<input type="checkbox"/>	NO	Job: 212, Prog: A-5-N	9. DIRECTIVE AUTHORITY REQUIRING REPORT	
<input checked="" type="checkbox"/>	YES	IF YES GIVE ADP PROCESSING NO.											
<input type="checkbox"/>	NO	Job: 212, Prog: A-5-N											
10. PREPARING COMPONENT (include lowest level contributing information to report)  Accounts				11. FEEDER REPORTS (State total number and identify by Title, Form No., or nomenclature. Attach separate sheet if necessary.)									
<b>12. COST FACTORS</b>													
<b>A. MANUAL PREPARATION AND REVIEW COSTS</b>													
GRADE	HOURLY RATE	<input checked="" type="checkbox"/>	HOURS PER REPORT	=	COST PER REPORT	<input checked="" type="checkbox"/>	TIMES PREPARED = COST PER YEAR						
Pro rata share of review, analysis and distribution time.							\$104.84						
<b>B. COSTS OF COMPUTER PRODUCED REPORTS</b>													
20 pgs x 8 cys - 160 pgs x 3¢ = \$4.80 x 12 times =							\$ 57.60						
<b>TOTAL COSTS PER YEAR</b>						<del>\$ 57.60</del> \$ 162.44							
13. COMPLETE DETAILED JUSTIFICATION FOR THIS REPORT (in addition to directive or authority cited in item 9). IF KNOWN, INCLUDE DATE REPORT WAS FIRST STARTED AND COMPONENT WHO ESTABLISHED REQUIREMENT.													
<b>14. FUTURE GOALS</b>													
GOAL PROPOSED BY COMPONENT FOR THIS REPORT						ESTIMATED SAVINGS							
<input type="checkbox"/> RETAIN AS IS <input type="checkbox"/> OTHER (explain)						MAN-HOURS     DOLLARS							
<input type="checkbox"/> CHANGE													
<input type="checkbox"/> DISCONTINUE													
16. DATE OF INVENTORY		17. NAME AND TITLE OF PERSON FURNISHING INFORMATION					18. EXTENSION						
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